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TELECOPIER TRANSMITTAL SHEET

NO. OF PAGES (including this page): 7

TO: **Examiner Ron Schwadron**
Art Unit: 1644
FAX: (703) 308-4242
FROM: Sheela Mohan-Peterson
DATE: **November 12, 2002**
RE: DX0612K1B
USSN: 09/545,998
Filed: April 10, 2000
Title: MAMMALIAN CELL SURFACE ANTIGENS; RELATED REAGENTS

FAX RECEIVED

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GROUP 1600

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Any difficulty with this facsimile, please call:
Lois E. Miller at (650) 496-1183

Attached please find:

- | | |
|---------------------------|---------|
| 1. Amendment Transmittal | 2 pages |
| 2. Amendment and Response | 4 pages |

I hereby certify that this correspondence is being faxed to Assistant Commissioner for Patents, Washington, D. C., 20231, Attn: **Examiner Ron Schwadron**, at 703-308-4242, on November 12, 2002

November 12, 2002


Lois E. Miller

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PATENT

Attorney Docket No.
DX0612K1B

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☒ transmitted by facsimil to the Patent and Trademark Office, Fax Number 703-308-4242,
 Attention: Examiner R. Schwadron, ART GROUP 1644

Date: Nov 12, 2002 By: Lois E. Miller

Lois E. Miller

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Daniel M. GORMAN, et al.

Serial No.: 09/545,998

Filed: April 10, 2000

For: MAMMALIAN CELL SURFACE
ANTIGENS; RELATED REAGENTS

Examiner: R. Schwadron

Art Unit: 1644

AMENDMENT TRANSMITTAL

Palo Alto, California 94304

Date: November 12, 2002

Assistant Commissioner for Patents
Washington, D.C. 20231

Transmitted herewith is an amendment in the above-identified application.

☐ A petition for a _____ month extension of time pursuant to 37 C.F.R. §1.136 accompanies this transmittal in response to the Office Action dated September 6, 2002 in connection with the above-identified application, thus extending the time for response from _____ to _____.

☒ The fee for new claims has been calculated as shown below.

| CLAIMS AMENDED | | | | | | |
|------------------------------------|--|-------|--|-------------------------|-------------|-----------------------|
| (1) | (2) CLAIMS REMAINING AFTER AMENDMENT | (3) | (4) HIGHEST NO. PREVIOUSLY PAID FOR | (5) PRESENT EXTRA | (6) RATE | (7) ADDITIONAL FEE |
| TOTAL CLAIMS | 9 | MINUS | 20 | = 0 | X \$18 | \$ 0.00 |
| INDEP. CLAIMS | 2 | MINUS | 3 | = 0 | X \$84 | \$0.00 |
| TOTAL CLAIM FEE FOR THIS AMENDMENT | | | | | | = \$ 0.00 |

Total Additional Fee for this amendment (Extension Fees + Claim Fees) = \$ 0.00

PATENT

☐ Charge \$ 0.00 to DNAX Deposit Account No. 04-1239.

☒ Please charge any additional fees or credit overpayment to DNAX Deposit Account No. 04-1239.

A duplicate copy of this sheet is enclosed.

Respectfully submitted,

Date: November 12, 2002

By: Sheela Mohan-Peterson
Sheela Mohan-Peterson
Attorney for Applicant(s)
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Enclosed:

1. Amendment Transmittal (this document)
2. Amendment and Response
3. ~~Return postcard~~

2 pages, ~~in duplicate~~
4 pages